

09-15-05

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PTO/SB/21 (09-04)

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

61

Application Number

10/766,747

Filing Date

January 28, 2004

First Named Inventor

Shigeo Morimoto

Art Unit

1623

Examiner Name

Elll Peselov

Attorney Docket Number

A0407-001592A

### ENCLOSURES (Check all that apply)

|   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form                  | <input type="checkbox"/> Drawing(s)   | <input checked="" type="checkbox"/> After Allowance Communication to TC                 |
| <input checked="" type="checkbox"/> Fee Attached                          | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input checked="" type="checkbox"/> Amendment/Reply                       | <input checked="" type="checkbox"/> Petition  | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input checked="" type="checkbox"/> After Final                           | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Proprietary Information  |
| <input checked="" type="checkbox"/> Affidavits/declaration(s)             | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Extension of Time Request                        | <input type="checkbox"/> Terminal Disclaimer  | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):         |
| <input type="checkbox"/> Express Abandonment Request                      | <input type="checkbox"/> Request for Refund   | Original specification incorporating certificate of correction                          |
| <input type="checkbox"/> Information Disclosure Statement                 | <input type="checkbox"/> CD, Number of CD(s) _____                                      | Statement of Facts to Support Petition  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)           | <input type="checkbox"/> Landscape Table on CD  | Petition Fee for \$130.00   |
| <input type="checkbox"/> Reply to Missing Parts/Incomplete Application    | Remarks   | Return Postcard   |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 |   |   |

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |                                      |          |        |
|--------------|--------------------------------------|----------|--------|
| Firm Name    | Patterson, Belknap, Webb & Tyler LLP |          |        |
| Signature    |                                      |          |        |
| Printed name | Stuart E. Pollack                    |          |        |
| Date         | September 14, 2005                   | Reg. No. | 43,862 |

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ATTORNEY DKT NO.: A0407-001592A

PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

|                                     |   |                   |
|-------------------------------------|---|-------------------|
| Reissue Serial Number:              | ) |                   |
| 10/766,747                          | ) |                   |
| Applicants: Shigeo Morimoto et al.  | ) | Group Art Unit:   |
|                                     | ) | 1623              |
| Filed: January 28, 2004             | ) |                   |
| In re Reissue Application           | ) | Confirmation No.: |
| of U. S. Patent No. 6,342,590       | ) | 3658              |
| For: Erythromycin A Derivatives and | ) | Examiner:         |
| Method for Preparing Same           | ) | Elli Peselev      |

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

September 14, 2005

**EXPRESS MAIL CERTIFICATE**

Express Mail Label No.:EJ771306230US

Date of Deposit: September 14, 2005

Sir:

I hereby certify that the following attached papers:

1. Transmittal Form SB/21;
2. Amendment and Response to Final Rejection Under 37 C.F.R. § 1.116 (20 pages);
3. Reissue Specification in double-column format, including certificate of correction changes (7 pages of specification, incl. 1 pages of claims, 1 page of abstract);
4. Supplemental Reissue Declaration Under 37 C.F.R. §1.175, signed by five inventors, with a blank signature block for the sixth inventor (25 pages);
5. Fee Transmittal Form SB56 (1 page) (**2 copies**);
6. Check for additional independent claim in the amount of \$200.00 payable to "Director of the U.S. Patent and Trademark Office";
7. Petition Under 37 C.F.R. §1.47 (2 pages);
8. Statement of Facts to Support Petition Under 37 C.F.R. § 1.47 (2 pages);

9. Check for Petition under 37 C.F.R. § 1.47 in the amount of \$130.00 payable to "Director of the U.S. Patent and Trademark Office"; and

10. Return Post Card.

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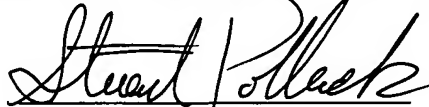
Patterson, Belknap, Webb & Tyler LLP

1133 Avenue of the Americas

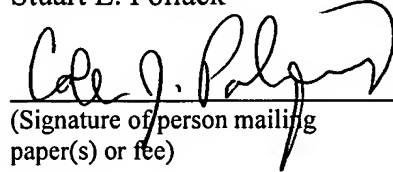
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Stuart E. Pollack



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## REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number (Optional)  
A0407-001592A

### Claims as Filed – Part 1

|  | (1)<br>Claims<br>in<br>Patent | (2)<br>Number Filed in<br>Reissue<br>Application | (3)<br>Number Extra | Small Entity |     |    | Other than a Small Entity |         |
|--|-------------------------------|--|---------------------|--------------|-----|----|---------------------------|---------|
|  |                               |  |                     | Rate         | Fee |    | Rate                      | Fee     |
| Total Claims<br>(37 CFR 1.16(j))       | (A)                           | (B)  | **** =              | x \$ ____ =  |     | or | x \$ ____ =               |         |
| Independent claims<br>(37 CFR 1.16(i)) | (C)                           | (D)  | * =                 | x \$ ____ =  |     |    | x \$ ____ =               |         |
| Basic Fee (37 CFR 1.16(h))             |                               |  |                     | \$ ____      |     |    |                           | \$ ____ |
| Total Filing Fee                       |                               |  |                     | \$ ____      |     |    | OR                        | \$ ____ |

### Claims as Amended – Part 2

|   | (1)<br>Claims Remaining<br>After Amendment |       | (2)<br>Highest Number<br>Previously<br>Paid For | (3)<br>Extra<br>Claims<br>Present | Small Entity |     |    | Other than a Small Entity |           |
|---|--|-------|---|-----------------------------------|--------------|-----|----|---------------------------|-----------|
|   |  |       |   |                                   | Rate         | Fee |    | Rate                      | Fee       |
| Total Claims<br>(37 CFR 1.16(j))          | *** 18                                     | MINUS | ** 20   | * = 0                             | x \$ ____ =  |     | OR | x \$ ____ =               | 0         |
| Independent<br>Claims (37 CFR<br>1.16(i)) | *** 4                                      | MINUS | ***** 3   | = 1                               | x \$ ____ =  |     |    | x \$ 200 =                | 200       |
| Total Additional Fee                      |  |       |   |                                   | \$           |     |    |                           | \$ 200.00 |

\* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

\*\* If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

\*\*\* After any cancellation of claims.

\*\*\*\* If "A" is greater than 20, use (B – A); if "A" is 20 or less, use (B – 20).

\*\*\*\*\* "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

☐ Applicant claims small entity status. See 37 CFR 1.27.

☐ Please charge Deposit Account Number \_\_\_\_\_ in the amount of \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.

☒ The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account Number 16-0633.  
A duplicate copy of this sheet is enclosed.

☒ A check in the amount of \$ 200.00 \_\_\_\_\_ to cover the filing/additional fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

September 14, 2005

Date

43,862

Registration Number, if applicable

Signature of Applicant, Attorney or Agent of Record

Stuart E. Pollack

Typed or printed name

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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